



SUPERVISOR'S STATEMENT

In Connection With Disability Retirement Under the Federal Employees' Retirement System

Form Approved:
OMB No. 3206-0171

Section A--Applicant Identification

1. Name (Last, first, middle initial)	2. Date of Birth (mo., day, yr.)	3. Social Security Number
---------------------------------------	----------------------------------	---------------------------

Section B--Information About Employee's Performance (See Supervisor's Guidelines on back)

1. Title of Current Position (Attach a copy of position description and for employees covered by FPM Chapter 430, current performance standards and latest performance evaluation)	2. Job Series, Grade and Step - -	3. Date of Entry Into Current Position (mo., day, yr.)
4. Is employee unable to perform or is performance less than fully successful with regard to any critical element of current position?	<input type="checkbox"/> Yes → Complete items B5-B7 <input type="checkbox"/> No → Go to Section C	
5. Approximate Date Unacceptable Performance or Inability to Perform Began (mo., day, yr.)	6. Has employee received, after the date in item 5, a within-grade step or merit pay increase or an award based on performance of a critical element of the position? <input type="checkbox"/> Yes → Dates of performance on which increase or award was based <input type="checkbox"/> No	6a. Was within-grade increase granted under 5 CFR 531.409(d)? <input type="checkbox"/> Yes <input type="checkbox"/> No
7. Identify critical element(s) of the position which employee does not perform successfully or at all. If performance is not fully successful, explain how. Attach supporting documentation such as notice to employee that performance is less than fully successful or physician's recommendation regarding medical restrictions.		

Section C--Information About Employee's Attendance (See Supervisor's Guidelines on back)

1. Has employee's attendance stopped for apparent medical reasons? <input type="checkbox"/> Yes <input type="checkbox"/> No	1a. How long is absence expected to continue (if unknown)?		
2. Is employee's attendance unacceptable for continuing in current position? <input type="checkbox"/> Yes → Complete items C3-C5 <input type="checkbox"/> No → Go to Section D	3. Approximate date attendance stopped or became unacceptable (mo., yr.)		
4. Explain impact of employee's absence on your work operations.			
5. How many hours of leave has employee used since date in Item C3 for apparent medical reasons? (Attach an explanation of why you approved leave and copies of medical information on which you based your decision to approve leave, leave records, records of contact with or notices to employee. Include as much information as possible about specific reasons for leave use.)			
ENTER LEAVE HOURS USED		Annual	Sick LWOP

Section D--Information About Employee's Conduct (See Supervisor's Guidelines on back)

1. Is employee's conduct unsatisfactory? <input type="checkbox"/> Yes → Complete items D2-D3 <input type="checkbox"/> No → Go to Section E	2. Approximate date conduct became deficient (mo., yr.)
3. Describe how conduct is unsatisfactory (attach supporting documentation, such as notices to employee of proposed adverse actions)	

Section E--Accommodations (See Supervisor's Guide on back)

1. What efforts have you made to accommodate employee?
--

Section F--Supervisor's Certification

How long have you supervised employee? Years Months	Supervisor's Telephone Number (Including Area Code)	Supervisor's Office Mailing Address
I certify that all statements made on this Supervisor's Statement are true to the best of my knowledge and belief.		
Supervisor's Signature	Date	
Supervisor's Name (Typed)		

SUPERVISOR'S GUIDELINES

GENERAL INFORMATION

Disability retirement determinations are made in accordance with FERS disability retirement regulations (5 CFR 844). A finding of entitlement to disability retirement benefits is made only when the information submitted with the application shows that an employee is unable to render useful and efficient service because of disease or injury in the employee's current position, and the employee has not declined an offer of a vacant position in the same agency and commuting area at the same grade or pay level and tenure for which the employee is qualified for reassignment. Useful and efficient service means fully successful performance of the critical or essential elements of the position (or the ability to perform at that level), and satisfactory conduct and attendance.

The disability retirement application must contain documentation that specifically demonstrates:

1. A deficiency in service with respect to performance, attendance or conduct, or, in the absence of any actual service deficiency, a showing that the medical condition is incompatible with either useful service or retention in the position.
2. A medical condition, which is defined as health impairment resulting from a disease or injury, including a psychiatric disease.
3. A relationship between the service deficiency and the medical condition such that the medical condition has caused the service deficiency.
4. The duration of the medical condition, both past and expected, and a showing that the condition, in all probability, will continue for at least a year from the date the employee became disabled.
5. The applicant's inability to render useful and efficient service arose while the employee was serving under the Federal Employees' Retirement system.
6. The inability of the employing agency to make reasonable accommodation to the employee's medical condition.
7. The agency's consideration of the employee for reassignment to any available position within the employing agency and commuting area, at the same grade and pay level, for which the employee is qualified.

INSTRUCTIONS

The employee identified on the other side has indicated that he or she intends to apply for disability retirement. The applicant's signature on the "Applicant's Statement" authorizes you to provide the information and documentation requested. You are asked to provide only information about the applicant's job, performance, attendance, and conduct.

If you need more space in any section, attach a separate sheet and indicate an attachment is provided.

The following definitions apply to the terms used in the Supervisor's Statement:

- "Less than fully successful performance" means performance of an employee which fails to meet established performance standards in one or more critical elements of the employee's position, or the equivalent level for a position not under Part 430 of OPM's regulations.
- "Critical element" means a component of an employee's job that is of sufficient importance that performing below the minimum standard established by management requires remedial action, such as denial of within-grade increase, and may be the basis for removing or reducing the grade level of the employee.
- "Unacceptable attendance" means absence from work which is too frequent, unpredictable, or lengthy to allow the job to be done.
- "Unsatisfactory conduct" means conduct for which an employee may be removed or disciplined for cause under adverse action procedures. (For example, discourteous conduct to the public, behavior which disrupts the workplace, or behavior which poses a threat to the life, health, safety, or well-being of co-workers, subordinates, or the public.)
- "Accommodation" means a reasonable adjustment made to a job and/or work environment that enables the employee to perform the duties of that position. Accommodation may include modifying the worksite; adjusting the work schedule; restructuring the job; acquiring or modifying equipment or devices; providing interpreters, readers or personal assistants; and retraining the employee.
- 5 CFR 531.409(d) provides for a waiver of the requirements for determination of an employee's level of competence in certain cases where the employee was in duty status for less than 60 days during the 52 calendar weeks before a within-grade increase would be due. See FPM Chapter 531, Subchapter 4.

After completing and certifying this form and attaching the appropriate documentation, you should return the original to the employee or to your personnel office according to instructions and practices in your agency. In either case, **A COPY MUST BE GIVEN TO THE EMPLOYEE.** Please **DO NOT** send the form directly to the Federal Employees' Retirement System unless OPM specifically requests you to do so in a particular case.

If necessary, you may be contacted by the Federal Employees' Retirement System for additional information or clarification.